OMB NO. 1105-0002

|                 | For Six Me                                                                                                                                       | onth Period Ending_                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               | 8 2001                                               |                 |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------|-----------------|
|                 |                                                                                                                                                  | I - REGISTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | (Insert date) | •                                                    |                 |
| 1. (a) Name of  | Registrant                                                                                                                                       | (b) Re                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | gistration No | <b>)</b> .                                           |                 |
| CETD            | CETDC, Inc.                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               | 3652                                                 |                 |
| (c) Business    | Address(es) of Registrant                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               | 300-                                                 |                 |
|                 | nn Plaza, Suite#341<br>York, NY 10119                                                                                                            | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                                                      |                 |
| 2. Has there be | een a change in the information pr                                                                                                               | eviously furnished ir                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | connection    | with the following                                   | :               |
| (a)<br>(b)      | If an individual: (1) Residence address (2) Citizenship (3) Occupation  If an organization: (1) Name (2) Ownership or control (3) Branch offices | Yes   Yes | 7<br>7<br>7   | 40 현<br>40 현<br>40 현<br>40 전<br>70 전<br>40 전<br>40 전 |                 |
| (c)             | Explain fully all changes, if any                                                                                                                | y, indicated in items                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | (a) and (b) a | bove.                                                |                 |
|                 | IF THE REGISTRANT IS A                                                                                                                           | AN INDIVIDUAL, OMI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | T RESPONSE    | TO ITEMS 3, 4, ANI                                   | ) 5(a).         |
| 3. If you have  | previously filed Exhibit C1, state v                                                                                                             | vhether any changes<br>Yes □                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | therein have  | e occurred during th                                 |                 |
|                 | have you filed an amendment to to please attach the required amendment                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Yes 🗆         | No □                                                 | M19 -6 PH 9: 45 |

<sup>1</sup> The Exhibit C, for which no printed form is provided, consists of a true copy of the charter, articles of incorporation, association, and by laws of a registrant that is an organization. (a waiver of the requirement to file an Exhibit C may be obtained for good cause upon written application to the Assistant Attorney General, Criminal Division, Internal Security Section, U.S. Department of Justice, Washington, D.C. 20530.)

| . (a) Have any person<br>reporting period |                                                                                                        | fficers, directors or similar offi<br>No স্থ্র                                             | cials of the registrant during                                                  | this 6 month                           |
|-------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------------|
| If yes, furnish tl                        | ne following information:                                                                              |                                                                                            |                                                                                 |                                        |
| Name                                      | Posit                                                                                                  | ion                                                                                        | Date Connection                                                                 | Ended                                  |
|                                           |                                                                                                        |                                                                                            |                                                                                 |                                        |
| (b) Have any person                       | ns become partners, officers, o                                                                        | lirectors or similar officials du<br>No □                                                  | ring this 6 month reporting                                                     | period?                                |
| If yes, furnish t                         | he following information:                                                                              |                                                                                            |                                                                                 |                                        |
| Name                                      | Residence                                                                                              | Citizenship                                                                                | Position                                                                        | Date<br>Assumed                        |
| Yueh Er Ch                                |                                                                                                        | Street Taiwan, R<br>k, NY 11023                                                            | .O.C. Manager                                                                   | 9/18/00                                |
|                                           | named in item 4(b) rendered<br>Yes □<br>each such person and describe                                  | services directly in furtherance<br>No 🙀<br>e his service.                                 | of the interests of any forei                                                   | gn principal?                          |
| connection wit                            | h the registrant during this 6 n                                                                       | filed a short form registration nonth reporting?                                           | statement, terminated their<br>les □ No 🙀                                       | employment or                          |
| If yes, furnish                           | the following information:                                                                             |                                                                                            | _                                                                               |                                        |
| Name                                      |                                                                                                        | Position or connection                                                                     | Date                                                                            | terminated                             |
| rendered or wi                            | month reporting period, has t<br>Il render services to the regist<br>or secretarial, or in a related o | ne registrant hired as employed<br>ant directly in furtherance of t<br>r similar capacity? | s or in any other capacity, a<br>he interests of any foreign p<br>Yes 口    No 屎 | ny persons who<br>rincipal(s) in other |
| If yes, furnish                           | the following information:                                                                             |                                                                                            |                                                                                 |                                        |
| Name                                      | Residence<br>Address                                                                                   | Citizenship                                                                                | Position                                                                        | Date<br>Assumed                        |
| 6. Have short form statement?             | registration statements been fi                                                                        | led by all of the persons named<br>No □                                                    | l in Items 5(a) and 5(c) of th                                                  | ne supplemental                        |

If no, list names of persons who have not filed the required statement.

# II - FOREIGN PRINCIPAL

| 7. Has your c        | onnection with any                                                     | foreign principal<br>Yes □  | ended during this         | 6 month rep          | porting per            | iod?                    | <del>"-</del>   |           |
|----------------------|------------------------------------------------------------------------|-----------------------------|---------------------------|----------------------|------------------------|-------------------------|-----------------|-----------|
| If yes, furn         | ish the following in                                                   |                             | 110 🙅                     |                      |                        |                         |                 |           |
|                      | eign principal                                                         |                             |                           |                      | 1                      | Date of termina         | tion            |           |
| 8. Have you a        | cquired any new fo                                                     | reign principal² d<br>Yes □ | uring this 6 mont<br>No ☑ | n reporting p        | period?                |                         |                 |           |
| If yes, furni        | ish following inform                                                   | nation:                     | Λ                         |                      |                        |                         |                 |           |
| Name and a           | ddress of foreign pr                                                   | incipal                     |                           |                      |                        | Date acq                | quired          |           |
| China E              | to those named in Ideriod.  External Tra , 333 Keelu Taiwan            | ide Develo                  | nment Cour                |                      | om you con             | tinued to repre         | sent during the | e 6 month |
| 10. <b>EXHIB</b> (a) | ITS A AND B                                                            | or each of the new          | why promined for          |                      |                        |                         |                 |           |
| (-)                  | Have you filed for<br>Exhibit A <sup>3</sup><br>Exhibit B <sup>4</sup> | Yes 🗆<br>Yes 🗆              | No □<br>No □              | gn principals<br>N/A | s in item 8            | the following:          |                 |           |
|                      | If no, please attac                                                    | ch the required ex          | hibit.                    |                      |                        |                         |                 |           |
| (b)                  | Have there been represented during                                     | any changes in th           | e Exhibits A and period?  | B previously<br>Y    | ∕ filed for a<br>∕es □ | ny foreign prin<br>No □ | cipal whom y    | ou        |
|                      | If yes, have you                                                       | filed an amendme            | nt to these exhibi        | ts? Y                | ′es □                  | No □                    | N/A             |           |
|                      | If no, please attac                                                    | ch the required an          | nendment.                 |                      |                        |                         |                 |           |

<sup>2</sup> The term "foreign principal" includes, in addition to those defined in section I(b) of the Act, an individual organization any of whose activities are directly or indirectly supervised, directed, controlled, financed, or subsidized in whole or in major part by a foreign government, foreign political party, foreign organization or foreign individual. (See Rule 100(a) (9)). A registrant who represents more than one foreign principal is required to list in the statements he files under the Act only those principals for whom he is not entitled to claim exemption under Section 3 of the Act. (See Rule 208.)

3 The Exhibit A, which is filed on form CRM-157 (Formerly OBD-67) sets forth the information required to be disclosed concerning each foreign principal.

4 The Exhibit B, which is filed on Form CRM-155 (Formerly OBD-65) sets fourth the information concerning the agreement or understanding between the registrant and the foreign principal.

# III - ACTIVITIES

| 11. During this 6 month reporting period, have you engaged in any activities for or rendered any services to any foreign principal named in Items 7, 8, and 9 of this statement? Yes ☑ No □                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| If yes, identify each such foreign principal and describe in full detail your activities and services:                                                                                                                                                                                                                                                                                                                                                                                 |
| <ol> <li>Assist Taiwanese manufacturers in doing business with U.S. manufacturers and U.S. manufacturers in doing business Taiwanese manufacturers.</li> <li>Process trade requests from American, Taiwanese and other traders.</li> <li>Research new possible American market for Taiwanese goods.</li> <li>Keep U.S. importers and exporters informed by providing our updated publications such as '' Trade Opportunities in Taiwan'', '' Taiwan Product'' etc., to them</li> </ol> |
| 12. During this 6 month reporting period, have you on behalf of any foreign principal engaged in political activity <sup>5</sup> as defined below? Yes □ No □                                                                                                                                                                                                                                                                                                                          |
| If yes, identify each such foreign principal and describe in full detail all such political activity, indicating, among other things, the relations, interests and policies sought to be influenced and the means employed to achieve this purpose. If the registrant arranged, sponsored or delivered speeches, lectures or radio and TV broadcasts, give details as to dates, places, of delivery, names of speakers and subject matter.                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 13. In addition to the above described activities, if any, have you engaged in activity on your own behalf which benefits any or all of your foreign principals?  Yes  No  No                                                                                                                                                                                                                                                                                                          |
| If yes, describe fully.                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

<sup>5</sup> The term "political activities" means any activity that the person engaging in believes will, or that the person intends to, in any way influence any agency or official of the Government of the United States or any section of the public within the United States with reference to formulating, adopting or changing the domestic or foreign policies of the United States or with reference to political or public interests, policies, or relations of a government aforeign country or a foreign political party.

#### **IV - FINANCIAL INFORMATION**

| 14. (a) | RECEIPTS-MONIES  During this 6 month reporting period, have you received from any foreign principal named in Items 7, 8, and 9 of this statement, or from any other source, for or in the interests of any such foreign principal, any contributions, income or money either as compensation or otherwise?  Yes  No |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |                  |                               |                                                                               |  |  |  |  |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------|-------------------------------|-------------------------------------------------------------------------------|--|--|--|--|
|         | If no, ex                                                                                                                                                                                                                                                                                                           | If no, explain why.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                   |                  |                               |                                                                               |  |  |  |  |
|         | If yes, se                                                                                                                                                                                                                                                                                                          | et forth below in the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | e required deta                   | ail and separat  | ely for each foreign principa | l an account of such monies <sup>6</sup>                                      |  |  |  |  |
|         | Date                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | From W                            | hom              | Purpose                       | Amount                                                                        |  |  |  |  |
| 9/1/2   | .000 –                                                                                                                                                                                                                                                                                                              | 2/28/2001                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                   | Inc.<br>Taiwan   |                               |                                                                               |  |  |  |  |
| (b)     | During to                                                                                                                                                                                                                                                                                                           | 'S - FUND RASING Control of the cont | ng period, hav<br>items 7, 8, and | 19 of this state | ement? Yes □                  | Total \$ 295, 567.98  Impaign <sup>7</sup> , any money on behalf of any No 🖫  |  |  |  |  |
|         |                                                                                                                                                                                                                                                                                                                     | dicate the date the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | •                                 |                  | Pate                          |                                                                               |  |  |  |  |
| (c)     | During t                                                                                                                                                                                                                                                                                                            | 1 Items 7, 8, and 9 o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ng period, hav                    |                  |                               | nan money from any foreign principal interests of any such foreign principal? |  |  |  |  |
|         | If yes, fu                                                                                                                                                                                                                                                                                                          | rnish the following                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ; information:                    |                  |                               |                                                                               |  |  |  |  |
| for     | Name of<br>eign princ                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Date<br>receive                   |                  | Description of thing of value | Purpose                                                                       |  |  |  |  |

<sup>6, 7</sup> A registrant is required to file an Exhibit D if he collects or receives contributions, loans, money, or other things of value for a foreign principal, as part of a fund raising campaign. (See Rule 201(e).)

8 An Exhibit D, for which no printed form is provided, sets forth an account of money collected or received as a result of a fund raising campaign and transmitted for a foreign principal.

9 Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks," and the like.

| 10 / 1  |             |            |
|---------|-------------|------------|
| 15. (a) | DISBURSEMEN | ITS_MONIFS |

During this 6 month reporting period, have you

- (1) disbursed or expended monies in connection with activity on behalf of any foreign named in Items 7, 8, and 9 of this statement? Yesy No 🗆
- (2) transmitted monies to any such foreign principal? Yes  $\square$  No  $\square$

If no, explain in full detail why there were no disbursements made on behalf of any foreign principal.

If yes, set forth below in the required detail and separately for each foreign principal an account of such monies, including monies transmitted, if any, to each foreign principal.

| Date To Whom     |                | Purpose           | Amount       |  |
|------------------|----------------|-------------------|--------------|--|
| 9/1/00 - 2/28/01 | Office Expense | Salary            | \$178,870.13 |  |
|                  |                | Stationery        | 1,443.19     |  |
|                  |                | Postage, Tel,     | 7,154.76     |  |
|                  |                | Publications      | 2,830.45     |  |
|                  |                | Auto (1)          | 2,621.88     |  |
|                  |                | Entertainment (2) | 5,006.73     |  |
|                  |                | Taxes             | 42,604.51    |  |
|                  |                | Travel (3)        | 3,987.57     |  |
|                  |                | Others            | 6,460.75     |  |

#### Remarks:

- (1) Auto: Company car is for local transporation.
- (2) Entertainment: Please refer to the attached sheets.
- (3) Travel: Please refer to the attached sheets.

|                  | with activities on behalf of any<br>sh the following information:                                    | Yes □                                     | No 🙀                            |                   |
|------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------|-------------------|
| Date<br>disposed | Name of person<br>to whom given                                                                      | On behalf of<br>what foreign<br>principal | Description of thing of value   | Purpose           |
|                  |                                                                                                      |                                           | •                               |                   |
|                  |                                                                                                      |                                           |                                 |                   |
|                  |                                                                                                      |                                           |                                 |                   |
| Dusing this      | NTS-POLITICAL CONTRIBUTIO                                                                            | ns _                                      |                                 |                   |
| any omer per     | month reporting period, have son, made any contributions of se, or in connection with any press  Yes | i money or other things of v              | alue" in connection with an     | election to once  |
| If yes, furnish  | the following information:                                                                           |                                           |                                 |                   |
| Date             | Amount or th of value                                                                                | ing po                                    | ame of<br>olitical<br>unization | Name of candidate |

# V-INFORMATIONAL MATERIALS

| 16. During this 6 month reporting                             | g period, did you prepare, disser<br>Yes 닻                           | ninate or cause to be dissemi<br>No □ | nated any informational materials <sup>12</sup> ?                   |
|---------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------|
| IF YES, RESPOND TO THE                                        | E REMAINING ITEMS IN SEC                                             | TION V.                               |                                                                     |
|                                                               |                                                                      |                                       |                                                                     |
| 17. Identify each such foreign p                              | rincipal.                                                            |                                       | <del>.</del>                                                        |
|                                                               | rade Development Co<br>Lung Rd., Section                             |                                       |                                                                     |
|                                                               | g period, has any foreign princip<br>paring or disseminating informa |                                       | ocated a specified sum of money to Yes \( \square\) No \( \square\) |
| If yes, identify each such for                                | reign principal, specify amount, a                                   | and indicate for what period of       | of time.                                                            |
|                                                               |                                                                      |                                       |                                                                     |
|                                                               |                                                                      |                                       |                                                                     |
| 19. During this 6 month reportir                              | g period, did your activities in p                                   | reparing, disseminating or ca         | using the dissemination of                                          |
|                                                               | nde the use of any of the following                                  |                                       | -                                                                   |
| ☐ Radio or TV<br>broadcasts                                   | <ul><li>☐ Magazine or<br/>newspaper<br/>articles</li></ul>           | ☐ Motion picture film                 | s                                                                   |
| ☐ Advertising campaigns                                       | ☐ Press releases                                                     | ☐ Pamphlets or other publications     | ☐ Lectures or speeches                                              |
| Other (specify) Trac                                          | le Opportunities in                                                  | Taiwan, Taiwan                        | Product                                                             |
| 20. During this 6 month reporting the following groups:       | ng period, did you disseminate or                                    | cause to be disseminated inf          | formational materials among any of                                  |
| ☐ Public Officials                                            | ☐ Newspapers                                                         | 3                                     | ☐ Libraries                                                         |
| ☐ Legislators                                                 | ☐ Editors                                                            |                                       | ☐ Educational institutions                                          |
| ☐ Government agencies                                         | ☐ Civic group                                                        | s or associations                     | ☐ Nationality groups                                                |
| Other (specify)                                               | importers and ex                                                     | <del>(porters</del>                   |                                                                     |
| 21. What language was used in                                 | the informational materials:                                         |                                       |                                                                     |
| 🔀 English                                                     | ☐ Other (s                                                           | specify)                              |                                                                     |
| 22. Did you file with the Regist disseminated or caused to be | ration Unit, U.S. Department of a disseminated during this 6 mon     |                                       | f such informational materials<br>Yes 덫 No 디                        |
| 23. Did you label each item of s                              | uch informational materials with Yes 🖾                               | the statement required by Se          | ection 4(b) of the Act?                                             |

<sup>12</sup> The term informational materials includes any oral, visual, graphic, written, or pictorial information or matter of any kind, including that published by means of advertising, books, periodicals, newspapers, lectures, broadcasts, motion pictures, or any means or instrumentality of interstate or foreign commerce or otherwise. Informational materials disseminated by an agent of a foreign principal as part of an activity in itself exempt from registration, or an activity which by itself would not require registration, need not be filed pursuant to Section 4(b) of the Act.

# VI--EXECUTION

In accordance with 28 U.S.C. § 1746, the undersigned swear(s) or affirm(s) under penalty of perjury that he/she has (they have) read the information set forth in this registration statement and the attached exhibits and that he/she is (they are) familiar with the contents thereof and that such contents are in their entirety true and accurate to the best of his/her (their) knowledge and belief, except that the undersigned make(s) no representation as to truth or accuracy of the information contained in the attached Short Form Registration Statement(s), if any, insofar as such information is not within his/her (their) personal knowledge.

| (Date of signature)                     | (Type or print name under each signature <sup>13</sup> ) |
|-----------------------------------------|----------------------------------------------------------|
| 3/2/0/                                  |                                                          |
| , , , , , , , , , , , , , , , , , , , , |                                                          |
|                                         |                                                          |
|                                         | Prot Los                                                 |
|                                         | Bret Lee                                                 |

# UNITED STATES DEPARTMENT OF JUSTICE FARA REGISTRATION UNIT CRIMINAL DIVISION WASHINGTON, D.C. 20530

#### NOTICE

Title

Please answer the following questions and return this sheet in triplicate with your Supplemental Statement: Is your answer to Item 16 of Section V (Informational Materials - page 8 of Form CRM-154, formerly Form OBD-64-Supplemental Statement): YES or NO ¥ (If your answer to question 1 is "yes" do not answer question 2 of this form.) 2. Do you disseminate any material in connection with your registration: YES\_\_\_\_\_or NO\_\_\_X (If your answer to question 2 is "yes" please forward for our review copies of all material including: films, film catalogs, posters, brochures, press releases, etc. which you have disseminated during the past six months.) Bret Lee Please type or print name of signatory on the line above Director

| <b>DATE</b> 9/1/00 | PLACE<br>NYC | PURPOSE Lunch Welcome \$260.00 | NAME&ADDRESS Mr. Jerry S. Cheng Mr. Jeff Hung Ms. Fanny Yen (guests from Taiwan)                                         |
|--------------------|--------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| 9/2/00             | NYC          | Lunch<br>Welcome<br>\$100.00   | Dr. & Mrs. Ah Kau Ng<br>University of Southern Main                                                                      |
| 9/5/00             | NYC          | Dinner<br>Welcome<br>\$502.01  | Mr. V C Chu Mr. Yu Lin Chang Mr. Hon Yang Mr. T L Feng Investment & Trade Office 126 East 56th Street New York, NY 10022 |
| 9/13/00            | NYC          | Lunch Welcome \$180.00         | Mr. William Lai Mr. W H Chang (guest from Taiwan)                                                                        |
| 9/16/00            | NYC          | Lunch<br>Welcome<br>\$98.60    | Dr. Abraham Ho St. John's University                                                                                     |
| 9/20/00            | NYC          | Lunch<br>Welcome<br>\$138.00   | Mr. K L Chen Ms. C H Hsu (guest from Taiwan)                                                                             |
| 10/4/00            | NYC          | Lunch Welcome \$25.66          | Ms. Josephine Lin (guest from Taiwan)                                                                                    |
| 10/4/00            | NYC          | Dinner<br>Welcome<br>\$100.00  | Mr. H C Chang, CPA<br>515 Madison Ave.<br>New York, NY 10022                                                             |
| 10/8/00            | NYC          | Lunch Welcome \$111.57         | Mr. & Mrs. E L Tseng<br>(guest from Taiwan)                                                                              |

| 10/12/00 | NYC | Lunch           | Ms. Ammy Yang                        |
|----------|-----|-----------------|--------------------------------------|
|          |     | Welcome         | Mr. M C Chan.                        |
|          |     | \$95.14         | (guest from Taiwan)                  |
| 10/13/00 | NYC | Lunch           | Mr. F P Meng                         |
|          |     | Welcome         | Chinese Information and Culture      |
|          |     | <b>\$72</b> .00 | Center                               |
|          |     |                 | 1230 Ave. of the Americas            |
|          |     |                 | New York, NY 10020                   |
| 10/13/00 | NYC | Dinner          | Mr. Thomas Tsou                      |
|          |     | Welcome         | Ms. Sun Lin                          |
|          |     | \$215.00        | (guest from Taiwan)                  |
| 10/14/00 | NYC | Lunch           | Mr. Mike Yu                          |
|          |     | Welcome         | (guest from Taiwan)                  |
|          |     | \$175.00        |                                      |
| 10/28/00 | NYC | Lunch           | Mr. V C Chu                          |
|          |     | Welcome         | Investment & Trade Office            |
|          |     | \$168.00        | 126 East 56th Street                 |
|          |     |                 | New York, NY 10022                   |
| 11/17/00 | NYC | Dinner          | Ms. Dorothy Ouyang                   |
|          |     | Welcome         | Ms. T J Tsu                          |
|          |     | \$172.00        | Ms. Y E Wang                         |
|          |     |                 | (guest from Taiwan)                  |
| 11/21/00 | NYC | Lunch           | Ms. Sharon Pi                        |
|          |     | Welcome         | (guest from Taiwan)                  |
|          |     | \$98.81         |                                      |
| 11/22/00 | NYC | Dinner          | Mr. Woody Wei                        |
|          |     | Welcome         | Taiwan Sugar Corp.                   |
|          |     | \$40.00         | 2 World Trade Center                 |
|          |     |                 | New York, NY 10048                   |
| 11/24/00 | NYC | Lunch           | Ms. Jean Lee                         |
|          |     | Welcome         | (guest from Taiwan)                  |
|          |     | \$70.00         |                                      |
| 11/28/00 | NYC | Lunch           | Mr. Bob Chen                         |
|          |     | Welcome         | Taipei Economic & Cultural Office in |
|          |     | \$325.00        | New York                             |
|          |     |                 | 885 Second Ave.                      |
|          |     |                 |                                      |

|          |      |                    | New York, NY 10017 Mr. V C Chu Mr. Hon Yang Investment & Trade Office 126 East 56th Street New York, NY 10022 |
|----------|------|--------------------|---------------------------------------------------------------------------------------------------------------|
|          |      |                    | Mr. F P Meng Chinese Information and Culture Center                                                           |
|          |      |                    | 1230 Ave. of the Americas                                                                                     |
|          |      |                    | New York, NY 10020<br>Mr. David Wang                                                                          |
|          |      |                    | Central News Agency                                                                                           |
|          |      |                    | 2 Penn Plaza                                                                                                  |
| 10000    |      |                    | New York, NY 10001                                                                                            |
| 12/22/00 | NYC  | Lunch              | Mr. Abraham Tsu                                                                                               |
|          |      | Welcome            | (guests from Taiwan)                                                                                          |
| 12/29/00 | NIVO | \$121.50           |                                                                                                               |
| 12/29/00 | NYC  | Lunch              | Mr. H H Chou                                                                                                  |
|          |      | Welcome<br>\$34.00 | (guests from Taiwan)                                                                                          |
| 1/8/01   | NYC  | Lunch              | No. Albani XX                                                                                                 |
|          |      | Welcome            | Mr. Albert Wang                                                                                               |
|          |      | \$121.35           | (guests from Taiwan)                                                                                          |
| 1/13/01  | NYC  | Lunch              | Mr. Robert Chao                                                                                               |
|          |      | Welcome            | (guests from Taiwan)                                                                                          |
| <b></b>  |      | \$85.00            |                                                                                                               |
| 1/18/01  | NYC  | Dinner             | Mr. & Mrs. Terry Huang                                                                                        |
|          |      | Welcome            | (guests from Taiwan)                                                                                          |
| 1/31/01  | MVC  | \$190.00           |                                                                                                               |
| 1/31/01  | NYC  | Lunch              | Mr. Frank Kelly                                                                                               |
|          |      | Welcome            | Ms. Laura Jones                                                                                               |
|          |      | \$125.00           | United States Ass'n of Importers of                                                                           |
|          |      |                    | Textiles and Apparel                                                                                          |
|          |      |                    | 1 3 E. 16 <sup>th</sup> St.                                                                                   |
|          |      |                    | New York, NY 10003                                                                                            |

| 2/7/01  | NYC | Dinner Welcome \$95.00 Lunch Welcome       | Prof. Ted Teng Stony Brook University  Mr. H C Chang, CPA                                                                                                                                                                                           |
|---------|-----|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2/20/01 | NYC | \$160.00<br>Dinner<br>Welcome<br>\$1015.00 | Stamford, CT 06901 Mr. Warren Huang Mr. C H Huang Mr. M H Chen Ms. Ling Hui Lee Mr. Ton Lieh Cheng Mrs. T T Cheng Ms. Y E Jeng Ms. Fanny Yen Mr. Aric Chiu Mr. Kenny Ou Mr. C S Hong Mr. C H Tasi Mr. Tony Chian Mrs. Alice Lo (Guests from Taiwan) |
| 2/29/01 | NYC | Lunch<br>Welcome<br>\$113.00               | Ms. B L Yao Ms. C S Chang Mr. G H Wang (Guests from Taiwan)                                                                                                                                                                                         |

# **TRAVEL**

| DATE     | NAME        | TITLE         | <b>PURPOSE</b> | PLACE           |
|----------|-------------|---------------|----------------|-----------------|
| 9/7/00   | Bret Lee    | Director      | Meeting        | Boston, MA      |
| 9/14/00  | Manik Mehta | <b>Editor</b> | Meeting        | Creskill, NJ    |
| 10/20/00 | Manik Mehta | <b>Editor</b> | Meeting        | Boston, MA      |
| 11/12/00 | Bret Lee    | Director      | Meeting        | Washington D.C. |
| 12/12/00 | Manik Mehta | <b>Editor</b> | Meeting        | Trenton, NJ     |
| 1/30/01  | Manik Mehta | Editor        | Meeting        | Bloomfield,CT   |
| 2/2/01   | David Liu   | Manager       | Meeting        | New Windsor, NY |